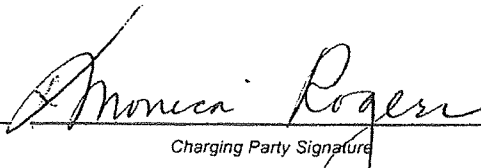
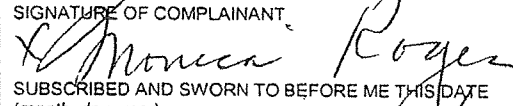



EXHIBIT GG

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION <small>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</small>		Charge Presented To: _____ Agency(ies) Charge No(s): 471-2013-03551	
Michigan Department Of Civil Rights and EEOC <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) Ms. Monica J. Rogers		Home Phone (Incl. Area Code) (248) 470-2888	Date of Birth [REDACTED] 1953
Street Address 4916 Browning Dr, Orchard Lake, MI 48323		City, State and ZIP Code	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name HENRY FORD HEALTH SYSTEM		No. Employees, Members Unknown	Phone No. (Include Area Code)
Street Address 1 Ford Place, 4e, Suite 4e, Detroit, MI 48202		City, State and ZIP Code	
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest 09-11-2013 09-24-2013 <input checked="" type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <p>I began working for the above named employer in October 1981. I am currently employed as an OHRD Consultant.</p> <p>On July 3, 2013, I filed a charge of discrimination with the EEOC, alleging discrimination based on my race (471-2013-02754). On September 11, 2013, the V.P. of Human Resources told me that I was being removed from my position and placed on an administrative leave. The reason given was that "people" felt I may be a safety threat in the workplace. When I asked for specifics, none were given. I was made to get an Occupational Health Evaluation, which I did on September 20, 2013. I am still on administrative leave.</p> <p>I believe I have been discriminated against by being removed from my job and placed on administrative leave in retaliation for filing a previous charge of discrimination, in violation of Title VII of the Civil Rights Act of 1964, as amended.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY – When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.	
Date Sep 24, 2013 Charging Party Signature 		SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year) 9/24/13 	

PLTF000081